
Government-Mandated Citizen Boards In The City of Winnipeg: An Analysis

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PREFACE

This report has been prepared as a summer research project for the Policy Co-ordination Branch of the Department of Urban Affairs, Province of Manitoba, under the Student Temporary Employment Program.

The purpose of this project is to provide background information on and analysis of formalized citizen participation in public sector decision-making in the City of Winnipeg. The main focus of this study is citizen participation in the form of government-mandated citizen boards.

Although this project is conducted under the direction of the Manitoba Department of Urban Affairs, the views expressed are those of the author and do not necessarily represent the official views of the Department.

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1.0 INTRODUCTION

Citizen participation in public sector decision-making has experienced considerable gains over the past few decades. From the initial "reactive" years of the 1960's when citizen participation first emerged as a significant issue, citizen input into public sector decision-making has grown into a diversity of initiatives ranging from ad hoc, informal and reactive participation to more ongoing, formalized and proactive involvement.

In recent years there has been growing perception of the benefits to be derived from the ongoing form of citizen participation in public sector decision-making. This is particularly the case with respect to the current move towards more community-based human services, which encourages the direct involvement of the community in the services which they use. In the case of school boards and hospital boards, which have been around for much longer, citizen input is also acknowledged as important for the delivery of their particular services.

The perception of the benefits to be derived from this form of citizen participation has led to its institutionalization through provincial legislation in many sectors of government. In Manitoba there are a number of formal, provincially mandated boards which enable citizens to participate in provincial services and urban government on an ongoing basis. While there appears to be general support for this type of citizen input into public sector decision-making, questions have arisen in Manitoba and elsewhere about the concept of formal citizen participation and its specific applications:

- Are the existing forms of formal decision-making effective in terms of enabling "meaningful" citizen participation? and;
- Are existing citizen bodies truly representative of the community they are intended to serve?

In terms of the first issue, there is the possibility that citizen participation mechanisms do not enable meaningful citizen input into the public sector. Arenstein (1969) describes citizen participation efforts as ranging from full citizen control to the manipulation of citizens by government. Arenstein argues that meaningful citizen participation will only be achieved when citizens have the power to actually determine public decisions by involving themselves in a particular activity with government.

The more formalized form of citizen participation, citizen boards, are placed high on Arenstein's ladder because they provide the most potential for meaningful citizen input into the public sector. However, should they lack certain key characteristics their effectiveness will be limited. Such bodies it is argued, should have control over policy, planning, priority setting and the budget of particular public sector services to be effective (Miller, 1978).

With respect to the issue of representation, there is a common assumption that formal opportunities for citizen input into public sector decision-making tend to be dominated by citizen elites, i.e., citizens from a higher than average socio-economic grouping. Generally, it is believed that participation is limited to a certain segment of the population and therefore is not

representative of the overall community. If citizen participation vehicles are to be representative of the community, it is argued that they should reflect as closely as possible the composition of the community. With community-based human services, it is a further belief that boards should have representatives of the consumers of the services provided.

The purpose of this study is to examine and assess how formal legislated citizen boards function as citizen input mechanisms in public sector decision-making. More precisely, this study will:

- 1) Examine and assess the effectiveness of existing citizen boards as citizen participation mechanisms; and
- 2) Determine the representativeness of existing citizen boards in terms of the communities they serve.

Effectiveness will be measured by the role and responsibilities of the boards and by the accessibility of participation to the general public, while representativeness will be measured by the boards' existing and mandated composition. This study will be concerned only with those citizen boards operating in the City of Winnipeg. The following definition of government-mandated citizen boards will be used for this study:

Citizen boards mandated under government legislation which enable citizen participation in the decision-making process of provincial human services and urban government in the City of Winnipeg.

Research for this study was divided into three segments. The first segment consisted of a review of the literature on citizen participation theory and on the aspects of the various organizations and their respective boards that are the subject of this study. The second involved interviews with departmental staff, organization administrators and academics. The final segment involved surveys of organization administrators, chairpersons of boards and general members of boards. The research findings will be presented in this paper as follows:

- Section 2.0 provides an overview of citizen participation theory and the main issues relevant to citizen participation.
- Section 3.0 provides a descriptive inventory and analysis of the government-mandated citizen boards in the City of Winnipeg.
- Section 4.0 discusses the findings presented in section 3.0 in relation to the theory of and issues relevant to citizen participation.
- Section 5.0 provides the conclusions to this analysis.

It should be noted that due to certain limitations, particularly those of time and manpower, the depth of analysis in this study is not to the extent normally required for a complex subject such as citizen participation. Consequently, there are many issues and details that could not be explored. Our purpose is not to confront all of the issues concerning formal citizen participation, but rather to develop a better understanding of how such mechanisms currently operate and to explore some of the more common issues of effectiveness and representativeness. It is expected that such an approach will yield more questions than answers which, it is hoped, may form the basis for further study.

2.0 CITIZEN PARTICIPATION IN THEORY

This section provides an overview of citizen participation, its goals; problems and possibilities; and more specifically, the main issues concerning its effectiveness today. Following from the definition presented in the introduction, we are concerned primarily with citizen participation in the form of citizen boards which are mandated under government legislation. It is this form of citizen participation which, in most cases, enables the direct involvement of members of the public in the business of governing.

Historical Factors

The literature points to a number of historical factors responsible for stimulating the growth of citizen participation in North America. To a large extent it is seen as a product of the consequences of the bureaucratization of modern society. The growth of the public bureaucracy in North America in turn was a direct response to late 19th century industrialization. According to Galbraith (1952:118) public sector growth acted as a "countervailing power" to the concentration and growth of industry that was occurring at that time. As a consequence of industrialization, new social and economic difficulties arose which largely became the responsibility of the public sector. The new demands being placed on the state necessitated a growth in public bureaucracy in order to deal with them adequately.

It is important to note that initially the social consequences of industrialization were absorbed by such mediating institutions as the church and the family. Eventually, however, these institutions were unable to deal adequately with the growing complexity and widespread social consequences arising from industrialization. This placed increasing pressure upon the state to take over where these institutions left off. As the public became more and more dependent upon the state for a variety of its needs it was inevitable that the question of the government's ability to address these needs would eventually arise. When it did, it became quite apparent that the bureaucratic structure that had developed specifically to address societal needs was not capable of doing so adequately in all cases.

In Kweit and Kweit's book, Implementing Citizen Participation in a Bureaucratic Society: A Contingency Approach, an entire section is devoted to the inherent difficulties encountered with the growth of public bureaucracies in modern society. It is pointed out by these authors that while bureaucracy is needed to create order and stability in a complex society, the same characteristics of bureaucracy that make this possible also contain the "... seeds of the bureaucracy problem that plagues modern society" (Kweit and Kweit, 1981:64). If we look at Max Weber's ideal bureaucracy we find that such an organization is intended to create efficiency and rationality in the modern world (Gerth and Mills, 1946 in Kweit and Kweit, 1981). It is a form of organization which enables us to manage the complexities of modern society. However, while providing us with technical expertise to deal with complex

problems it has also resulted in decreased democratic accountability and increased distrust and alienation (Kweit and Kweit, 1981). Furthermore, its emphasis on rationality and impersonality has resulted in the dehumanization of both the bureaucrat and the citizen. Given the inherent nature of the bureaucratic organization, the individual is left powerless and alienated in modern society (Kweit and Kweit, 1981).

In addition to the consequences of mass-industrialization and the inherent inadequacies of the bureaucratic organization to deal with growing public demands, Langton(1978) argues that mass media, population growth, technology and affluence were also factors in the growth of citizen participation. According to this author mass media subjected the government bureaucracies and officials to public scrutiny exposing many problems, while population growth, technology and affluence added to the regulatory and service demands placed on government. The stimulation of citizen participation was a direct result of these historical factors (Langton, 1978).

From this brief overview it appears that the predominant motivation for citizen participation was the inability of the existing bureaucratic structure to deal adequately with the growing demands of the public. This obviously frustrated public sector decision-making. Furthermore, the growing expenditures of government on public programs, led citizens to demand more accountability of public officials.

The growing dissatisfaction of the public with the bureaucratic organization appears to have culminated in the 1960's, with public protests against various government programs. In particular, the public reaction to urban renewal projects in U.S. cities was to demand and eventually receive more say in public sector decision-making. Emerging from the 60's as reactive, ad hoc citizen activism, citizen participation later developed into a variety of forms enabling citizen input into public sector decision making. Today, while the activism type of citizen participation is still common, the perceived merits of more ongoing, pro-active participatory procedures have led to the development of a variety of more formal mechanisms such as governing boards. However, it must also be noted that some citizen boards such as school boards and hospital boards predate this period of activism.

Benefits and Costs of Citizen Participation

There are a variety of benefits associated with citizen participation cited by the literature. Kweit and Kweit (1981) categorize them into three groups: societal, individual and governmental.

With respect to societal benefits, citizen participation is seen as contributing to a reorganization of society whereby the distinction between the governed and the governors is diminished. This involves the move to a more participatory form of democracy where citizens share power equally with the government. It is also seen as a process which increases freedom and equality in society by attempting to include all groups (particularly low-income groups) in society.

At the individual level, citizen participation is viewed as contributing to the fulfillment of oneself as a human being, reducing alienation, providing an education process and helping to develop a sense of community on the part of the individual. Fulfillment of oneself as a human being is derived from participating in political actions. This belief goes back to the Aristotelian concept that a political man can only be fulfilled as a human being by taking part in the actions of the polity. Alienation is seen as being reduced because participating people feel more a part of a system rather than apart from it. The education process associated with citizen participation consists of becoming familiar with various aspects of government and of the personal growth and development derived from taking on responsibilities and being exposed to new and different ideas. Kweit and Kweit (1981) also point out that people may become more tolerant of and better able to understand government. In addition, by working with other people individual goals become group goals and a sense of community can develop. This co-operation may also lead to a greater sense of purpose and pride for the individual. A further point raised by Cooper (1983) and supported by many theorists is that citizen participation is an individual's right as a member of a democratic polity.

In terms of the benefits to government associated with citizen participation, Kweit and Kweit (1983) suggest that the overall administration of government is expected to improve with citizen participation. They argue that by having citizens and government working together, communications between the two should improve which should translate into improved service delivery. There is a greater chance that citizen interests are reflected in government decision-making if citizens have had the opportunity to participate

in this process. Programs that are more sensitive to public needs, inturests and wants should generally be more effective. In addition, Lucas (1976) suggests that citizen participation in public sector decision-making should also increase the likelihood of citizens accepting government decisions because they will have had a say in the matter. Furthermore, by permitting citizen involvement the resource base used for decision-making will be much broader, thereby increasing the chances that better decisions will be made.

In addition to the above three types of benefits resulting from citizen participation, Lucus (1976) writes that participation is the best guard against state, bureaucratic and professional paternalism. As such, it helps to prevent staleness and parochialism. The citizen participant is viewed as the "fresh blood" which brings in the community perspective of felt needs. Needs which, as Lucus (1976) points out, are often overlooked by the professional. Participation also challenges internalism and the resistance to change which is often associated with professionalism (Lucus, 1976.)

From this list of benefits derived from citizen participation perhaps the most significant is its ability to make public services geared more to community need. This improved responsiveness and effectiveness benefits both the government (programs can be more efficient as they will be designed for specific identified needs) and the public (programs will be more sensitive to their needs, wants and interests).

Citizen participation is particularly important with respect to the direction in recent years toward more community-based human services. With this type of program delivery system citizen participation plays a key role. The primary goal of such a delivery system is to make programs more responsive to specific community needs. In order to accomplish this it is felt that the residents of the community should have the opportunity to participate in those decisions which influence their lives. The community-based service delivery system offers citizens the opportunity to be actively involved in the development, decision-making and ongoing administration of the services provided. There are a number of methods utilized to accomplish this participation, the most promising of which is to utilize citizens on the governing boards of particular services. With community participants on the board, along with professionals and administrators, it is felt that such boards will benefit from the broader resource base not available to a homogeneous board (Adkins, 1985). By utilizing a broader resource base it is believed that programs will be better designed simply by taking advantage of the particular knowledge and expertise of each group participating in the decision-making process.

Despite the potential benefits of citizen participation, a number of problems or disadvantages of involving citizens directly in public sector decision-making have been cited in the literature. The most common disadvantage cited is the time and effort that is required to organize and operate ongoing citizen participation. Particularly, it is the inefficiency with respect to identifying public preferences and aggregating them into coherent public policy that troubles critics the most (Checkoway and

Vantil, 1978). Critics argue that because of the time and cost involved in soliciting participation and in operationalizing the diversity of public views, the process is highly inefficient. The counter-argument to this, however, is that participation by citizens can result in a decision-making process and programs which, in fact, are more efficient and cost effective. As noted earlier, this is possible because with more information available there is greater chance that better decisions will be made and programs will be better designed to address actual needs. This in turn will save money in the long-run. It should be pointed out that this criticism is probably more relevant for informal forms of citizen participation.

Another more specific argument against citizen participation is that rather than increasing public support for government, it often results in greater dissatisfaction (Checkoway and Vantil, 1978). This relates to the inflated expectations of citizen participants which governments cannot reasonably meet. When demands are not met dissatisfaction and unrest results. While in some cases unreasonable expectations do arise, it may also be argued that this is a problem with the specific application of citizen participation rather than a general consequence. It is quite plausible that this problem can be averted simply by the use of appropriate management. With the knowledge that undue expectations may occur, those responsible for organizing citizen participation can ensure that everyone involved is informed of existing limitations. Furthermore, this problem is likely more common with ad hoc citizen participation than a more institutionalized, ongoing process.

A third criticism noted by Checkoway and Vantil (1978) is that citizen participation tends to undermine governmental authority to the point that institutions are unable to act decisively and effectively. Related to this is the argument that the influence of organized minority groups will bias administrative decisions and as a consequence decisions will not reflect the will of the majority. Citizen participation, it is argued, will also reduce the participation of creative bureaucrats and administrators thus effectively eliminating their valuable contributions. As a result of citizen participation, decisions will tend to ". . .reflect the lowest common denominator - the minimum acceptable alternative to all groups and individuals - rather than the best judgement of knowledgeable officials" (Checkoway and Vantil, 1978:49).

This certainly is a real possibility but it need not be so. Properly designed citizen participation that strives to maintain community representation should be able to avoid this problem. The process should ensure the participation of citizens, professionals and bureaucrats alike while providing requirements that will guard against self-perpetuation (in terms of board composition) and domination by any one group in the community. It is likely that such conditions would be more easily achieved by ongoing institutionalized participation processes such as mandated, community-based boards of directors than through ad hoc processes.

Another general argument against citizen participation is that citizens may not possess the required abilities to participate effectively in decision-making roles. The point here is that the resulting decisions will not be based on sound judgement. This may certainly result from participation processes involving only uninformed citizens, however, if the process involves a mixture of professionals, bureaucrats and citizens this could be avoided. It will also be lessened if the organization provides appropriate training to citizen board members. Furthermore, it is the unprofessional view of the citizen which is often most valued in citizen participation. As indicated earlier citizen participation enables the soliciting of as many views as possible so as to enrich the resource base for making decisions. Too frequently, certain groups in society are not permitted to participate because it is assumed that they have nothing to contribute when in fact they have valuable contributions to make.

Most of the disadvantages of citizen participation previously cited relate, to a large extent, to design problems. That is, they occur as a result of improperly designed citizen participation processes. This is a result of a lack of commitment to "real" citizen participation. If a true commitment existed many of these difficulties could be overcome - efficiency would be achieved, government stability would not be undermined, governmental authority would not be threatened and good decisions could result.

Successful Citizen Participation

In instances where citizen participation has been actively pursued a number of difficulties have arisen which bring into question the successfulness of citizen involvement in public sector decision-making. Of

paramount concern is the issue of representation. In order for citizen participation to be effective, particularly with community-based services, it must be representative of the community it is serving. Citizen participation must be representative of the various interests in the community but not dominated by any one interest. All too often it is found that citizen participation reflects a concentration of power, i.e.; it is dominated by people of higher socio-economic status (Kweit and Kweit, 1981). If this is the case then citizen representation is not being achieved and consequently the benefits to be derived from representation will not be realized. Governments will be responding to demands that reflect narrow interests.

Another common difficulty encountered concerns the effectiveness of citizen participation itself. This is related, in part, to the issue of representation but also to the influence that such participation has on government decisions. If citizen input does not, truly, influence the decisions made by government then there are serious concerns about its relevance. The effectiveness of citizen participation can be measured in a number of ways but for the most part it relates to where the citizen participation fits in to the overall decision-making process of government. A particular distinction would be direct input (governing) versus indirect input (advisory). Another distinction is the structure of the citizen participation mechanism itself. Kweit and Kweit (1981) in their analysis suggest that citizen committees and boards are the most effective way to structure citizen

participation. Given that this structure is the type of citizen participation being considered in this paper, it is appropriate to consider some specifics about what makes citizen participation of this nature successful. The following is a review of the eight elements required for successful citizen participation addressed by Kweit and Kweit (1981):

- (1) It is imperative that boards have legal authority, particularly the control of a budget. The authors point out that it is important to have control over a budget as the budget sets the parameters within which policy is made. They also make the distinction between citizen committees and citizen boards whereby committees tend to have an advisory function while boards have a legal authority to determine policy. An example of this distinction would be Residents' Advisory Groups of the City of Winnipeg versus Child and Family Services Agency Boards of Directors.
- (2) As alluded to earlier, the board's position within the decision-making process is vitally important. The earlier the stage of the board's involvement in the decision-making process, the greater its level of influence.
- (3) A related factor concerns the functions that the board performs. A board which has governing functions such as program planning and implementation, fiscal management, and policy development will go a long way to enabling meaningful citizen participation. It is also important that the legal authority of the board be specified clearly and understood by all.

- (4) Another important factor is whether or not a board has an independent power base. In order for citizen participation, i.e. citizen boards, to be effective, they must retain an independent power base which enables them to perform their duties freely. Leo and Chekki (1988) professors from the University of Winnipeg, emphasized this point in interviews, noting that many failed citizen participation attempts are due to a lack of an independent power base.
- (5) Information and expertise are crucial. In order for boards to make informed decisions, they must have access to all the necessary information and they must know how to use it. It is also important for boards to maintain some level of expertise in order to function properly. Boards are faced with complex matters which often require particular expertise to deal with effectively.
- (6) The structure of boards should be kept simple so as to ensure flexibility and so that it does not scare off potential participants.
- (7) The methods used to select members can be very important. The authors point out that organizations which use appointments tend to be the least effective. With appointments there is the tendency to select people who are supportive of the existing agency. This perpetuates the status quo and increases the chance of passivity. It is important to maintain a flow of "new blood" on boards to encourage new ideas and perspectives. The authors suggest that the best method of recruitment is an election. Elections are more desirable because they open the opportunity for all members of the community to participate.
- (8) The final point is that goals and strategies of the organizations should be realistic and clear. This will avoid unnecessary dissatisfaction resulting from unattainable expectations.

The best way to provide for citizen participation in public sector decision-making is to make statutory provision for it. Provision of statutory opportunities will at the least ensure a basic and universal level of access for citizens. However, it is noted that the provision of such opportunity does not ensure that people will participate (Minister of Urban Affairs, 1987). The question of who participates is another, highly complex issue in itself. For the most part all citizen participation efforts can do are ensure that opportunities for participation are accessible equally to everyone.

The following section will deal with some specific applications of government-mandated citizen boards in Winnipeg.

3.0 GOVERNMENT MANDATED CITIZENS BOARDS IN WINNIPEG

This section provides an inventory and an analysis of those existing citizen boards in the City of Winnipeg which meet the definition stated in the introduction. Included is an analysis of hospital boards, school boards, child and family services agency boards, Residents' Advisory Groups of the City of Winnipeg and a number of other existing or proposed boards that generally meet the definition provided. The intention of this analysis is to document a number of aspects of these boards including: legislation which creates and empowers them, the mandated and actual responsibilities of the boards, their mandated and actual membership details and the other opportunities that exist for citizen involvement in the organizations.

3.1 Hospital Boards

The first type of citizen board to be considered are hospital boards of the major general hospitals in the City of Winnipeg. There are seven such hospitals including: Victoria General, Grace General, Seven Oaks General, Boniface General, Health Sciences Centre, Concordia and the Misericordia General.

All seven general hospitals listed above have their own Acts of Incorporation which set out the objectives of the corporation and in some instances details concerning the board of directors. The general operating requirements for urban health facilities are prescribed by The Hospitals Act.

Responsibilities and other details concerning the boards of directors are provided for in the Acts or by-laws of each hospital. These responsibilities comply with the standards set by the Canadian Council on Hospital Accreditation. In their "Standards for Accreditation for Canadian Health Care Facilities" the Council outlines the responsibilities of a hospital board of directors as follows:

There shall be a governing body or equivalent that has a legal and moral responsibility for the conduct of the health care facility in all its aspects and, in particular, for maintenance and improvements in standards of patient care. It is responsible to the patient, the community and the sponsoring organization(s), if applicable. Its official representative is the chief executive officer. (Canadian Council on Hospital Accreditation 1984 cited in Malone, 1987)

Thus, hospital boards of directors have a legal as well as moral responsibility for all aspects of hospital operations, including the quality of care. More specifically, Malone (1987) notes that hospital boards are responsible for: establishing policies and by-laws to ensure a high quality of care; planning; appointing a Chief Executive Officer (CEO) and medical staff; and taking an active political role in the hospital's best interest. In terms of planning, the author suggests that effective planning can enable hospitals to deal with the otherwise incompatible responsibilities of meeting community needs while maintaining financial solvency. Through its appointments of CEO and medical staff, the board is in effect delegating responsibilities for the day-to-day operations of the hospital and for medical care. With respect to its political role, it is noted that the board must be actively involved politically to ensure that the hospital's interests are

considered when the government is establishing policy (Radcliffe, 1984 in Malone, 1987). In this role the board acts as a lobbyist for hospital needs, an advocate of public needs and an ambassador in terms of being able to deal effectively with the political pressures exerted on it from external agencies. Finally, the board is seen as an interpreter between the hospital and the community"...ensuring future needs are met, providing accurate and timely information on the problems and achievements of the hospital; and finally, meeting the needs and desires of the community through hospital objectives" (Malone, 1987:4).

In their presentation to the Canadian Hospital Associations Annual Conference in Halifax(date?:13) the Manitoba Health Organizations, Inc.(MHO) suggested that today's hospital boards represent the link to the community in a health care system where local hospital boards and provincial health ministers are seen as "partners" in health care. According to MHO, hospital boards, as a voluntary board with local jurisdiction, have enabled the community to become involved in their own health care delivery. Furthermore, MHO noted that the role of hospital boards has expanded in recent years to now include more local control over decision-making and policy development. These characteristics reflect the evolution of hospital boards to a more community-based organization (MHO,date?).

Due to a variety of factors (the separation of policy and executive functions; social pressures which brought some measure of personal and legal responsibility for board members; and increased demand for public accountability), hospital boards are facing a much more demanding and expanded role today according to MHO. A necessary response to the pressure has been the restructuring of hospital boards. More thought is now given to the criteria for composition of boards and the qualifications of candidates for board vacancies. According to the MHO, more importance is being placed on the recruitment, abilities, experience and skills of trustees in an effort to create strong, independent and effective boards to meet current challenges.

There are a number of considerations that are made in terms of the composition of hospital boards. The MHO and the Manitoba Health Services Commission's Director of Urban Health Facilities point out that the predominant consideration is the mission of the hospital. Although hospitals in Winnipeg are publicly funded, most are privately owned and as a result each is guided by a different mission. Their mission is based on strict moral and philosophical codes which reflect the hospitals' private ownership (Siemens, 1988). It is important to a hospital to recruit board members that are committed to the hospital's mission. Furthermore, MHO suggests that hospitals have certain management needs which require specific expertise. This necessitates having board members that are trained professionals or experienced in specific fields. It is also important, according to MHO, to have board members which represent the various constituencies in the community. However, MHO qualifies this by stating that such representativeness has to be "...carefully considered within the context of the varying skills and experience the board needs" (MHO, date?:32).

While the composition of the hospital board depends largely on the mission of the hospital the MHO believes that it could include representation from: different social, economic, religious or ethnic groups; different geographical areas; clients; specific professions; and citizens at large. Ideally representation on boards should reflect "... community make-up, community needs and the necessary skills required to complement organizational objectives"(MHO, date?:37).

Hospitals are very particular about the type of person they have on their boards of directors and understandably so given their responsibilities. One hospital reviewed provides specific details of the "criteria" for board members in a trustee manual. Portrayed is a person who is highly motivated, a leader in the community and who has a record of responsible employment and/or voluntary positions. It is interesting to note from this manual the significant emphasis that is placed on a person's current and past experience and positions in determining his/her suitability. One is left with the impression that only "outstanding" community residents with responsible community and/or employment experience are eligible for trustee positions.

The same trustee manual noted that the board should be composed of people who are "representative of leadership in the community", rather than of people who are "representative of the community". Individuals on the board are seen to have a legal duty to represent no one but the hospital. As such, their loyalty is to the institution not to the community. This position was reiterated by a number of hospital administrators and would appear to be an effort, in part, to avoid interest group representation on the board.

The actual composition of hospital boards varies considerably between hospitals reflecting the different needs of the institutions and to a large extent, the different missions. With the exception of the St. Boniface and Misericordia Hospitals, the composition of the hospital boards studied is specified either in the Act or by-laws of each hospital. The boards are composed of trustees elected or chosen from the community and/or trustees that are appointed. In terms of those boards which elect some trustees, all utilize a nominating committee composed of board members. This committee is responsible for presenting a list of possible candidates for vacant positions to the board for election. In essence, therefore, all hospital board trustees are chosen by the board itself. The only exception to this is the St. Boniface Hospital where the owners choose the trustees. The appointed positions on hospital boards consist largely of standing representation from a variety of agencies or professional groups. Some of those represented include: medical and nursing staff of the hospital, hospital administration, owners of the hospital, City of Winnipeg, Minister of Health, University of Manitoba Faculty of Medicine, University of Manitoba Board of Governors, religious organizations and affiliated medical foundations. Not all hospitals have representation from all these groups. As noted earlier, representation depends upon the specific needs of the hospital. For example, hospitals such as the Health Sciences Centre and the St. Boniface have representation from the Faculty of Medicine because they are teaching facilities. Other hospitals do not require such representation because they are not teaching hospitals.

The length of tenure for hospital trustees for most hospitals is specified either in the hospital's Act or by-laws. For the most part, tenure for community elected or appointed positions has a six year, two term maximum. Exceptions to this are the Victoria General and the Health Sciences Centre

which have ten year and nine maximum tenures respectively. Appointed hospital board positions have maximum tenures that vary from two years to unlimited tenure. In terms of size, hospital boards vary from 14 to as many as 22 members.

The actual composition of hospital boards in terms of occupation is depicted in Tables 3.1 and 3.2. It should be noted that this data is derived from five out of the seven hospitals studied. Two hospitals were unwilling to provide us with information on their board's composition. In total there were 84 trustees among the five hospitals that provided data. Of the 84 trustees, 26 or 31% were appointed positions and 58 or 69% were community elected or chosen.

Table 3.1 Hospital Board Composition by Occupation:
Appointed Positions

Health Personnel	10	38%
Business Executive	4	15%
Elected Officials	3	15%
Retired	2	8%
Unknown	6	23%
Vacant	1	4%
	<u>26</u>	

The category "Health Personnel" on Table 3.1 consists largely of medical and nursing staff representatives of the hospitals, but also includes representatives from the Faculty of Medicine.

These "goals of board composition" are similar to what the administrators of the seven hospitals studied suggested their institutions looked for in terms of board composition. It was suggested that with respect to individual members they desired people who were committed to the purpose and goals (mission) of the hospital, could contribute something to the hospital and were successful and credible in the community. In terms of the overall board composition, hospitals try to achieve broad community representation, representation from specific organizations such as the City of Winnipeg, affiliated medical foundations, or the University of Manitoba Faculty of Medicine, as well as fulfilling specific needs such as management expertise. With respect to the latter point, most hospital boards try to maintain specific expertise particularly in the areas of Finance, Law and Business Management. Furthermore, a majority of hospital administrators commented that their boards avoided interest group representation and the domination of any one group or profession on the board.

Three out of the four business executives are from hospital administration. In terms of the "Unknown" category all are representatives of specific organizations such as affiliated medical foundations and religious organizations.

Table 3.2 Hospital Board Composition by Occupation
Community Elected or Chosen Positons

Legal Profession	8	14%
Business Executive	8	14%
Nonhealth Professional	8	14%
Health Personnel	1	2%
Professors	4	7%
Business Owner	3	5 %
Homemaker	6	10%
Retired	15	26%
Other	5	8%
Total	58	

The "Nonhealth Professional" category in Table 3.2 includes such occupations as accounting, architecture and engineering. The "Retired" category is composed of two engineers, educators and physicians; five business executives, a rail worker and three people whose occupations are unknown. Included in the "Other" category are such occupations as insurance sales, real estate sales and civil servants.

If the data on Tables 3.1 and 3.2 are combined we see that some 65% of hospital board trustees fall into the following occupational categories: health personnel (13%), business executives (14%), legal professionals (9%), retired (20%) and non-health personnel (9%). As a large proportion of the retired 20% are also professionals, it is obvious from this data that hospital boards are dominated by professionals generally and more specifically, by the professions of health, law and business. This is not surprizing given the concerns raised by hospital administrators and the MHO that hospital boards require professional expertise to deal with complex problems. It is worth

noting, however, that there appears to be very little representation of the "average" consumer and the general community on hospital boards. One administrator commented that his hospital board considered the homemaker to be the representative of the consumer while another argued that regardless of one's occupation, if a trustee is not appointed to represent a particular interest then that trustee is seen as being representative of the consumer and the general community.

While there is little data on Canadian hospital boards for direct comparison, a study of hospital boards in the Detroit area in the early 70's found similar findings to our analysis (Goldberg and Hemmelgarn, 1971). This study found that hospital boards were dominated by business executives, members of the legal and accounting professions, and spokesmen for medicine and hospitals. It was also noted that the consumer and the general community were "very seriously under-represented".

The MHO is of the opinion that Manitoba's hospital boards are representative of the people and communities they serve. This position has been developed largely from consideration of the number of factors that go into the selection and recruitment of Manitoba's hospital board trustees. According to MHO, the various factors considered have enabled hospital boards to generally maintain a broad representation of the community in terms of a variety of characteristics. MHO points out, however, that "ideal representation" is difficult to obtain and may not be achieved in all cases.

3.2 School Boards

There are nine school divisions considered by the Department of Education to be Winnipeg School Divisions. These include: Winnipeg School Division No. 1, St. James Assiniboia School Division No. 2, Assiniboine South School Division No. 3, St. Boniface School Division No. 4, Fort Garry School Division No. 5, St. Vital School Division No. 6, Norwood School Division No. 8, River East School Division No. 9 and Seven Oaks School Division No. 10. As required under The Public Schools Act each school division has a board which is the main governing body of the division. Part II of the Act prescribes such requirements as qualifications, nomination and election procedures, number of trustees and terms of office as they relate to school board trustees. Part III describes, in part, the powers and duties of school boards.

Historically school boards were established as a mechanism to permit citizens to participate in the school system (Krawec, 1988). The provincial government of the time felt that by delegating educational services to local school districts local educational needs would be more easily addressed. The transfer of educational services from the provincial government to local school districts effectively resulted in the separation of service responsibilities from policy development responsibilities. For the most part, the provincial government retained policy setting responsibility.

As the main governing body of the school division, school boards are responsible for all aspects of school division operations. This includes: budget control, hiring of teachers and staff, building management and programming. According to the Director of Administration for Manitoba Education, education policy is largely the responsibility of that department (Krawec, 1988). However, school boards are responsible for setting divisional policy within the general framework of the provincial policy.

In discussing school board responsibilities with some school superintendents and board chairpersons there was a general consensus that, in practice, school boards are fulfilling their mandated role as prescribed in The Public Schools Act. In terms of policy development, one of the superintendents noted that his school board took the role of approving or amending policy which was prepared by the administration. While this is probably a practical procedure it does raise the question of how much initiative originates with the board itself in terms of policy direction.

School board trustees are elected following the same format used for municipal nominations and elections of councillors as prescribed under The Local Authorities Election Act [see subsection 27(1) of The Public Schools Act]. The terms of office for trustees are the same as for municipal councillors. As prescribed under Section 22 of The Public Schools Act, everyone is eligible to run as a trustee provided they are over 18 years of age, a resident elector in the school division, a Canadian citizen and not

disqualified under any other provision of the Act. Trustees are elected either at large or by wards within the division. Presently there are six divisions which utilize a ward election system and three which conduct at-large elections. It is the prerogative of individual school boards to decide which system of election to utilize. According to Manitoba Education's Director of Administration, the existing distribution of the two election systems among Winnipeg School Divisions is due to both tradition and practical reasons (Krawec, 1988).

The issue of representation on school boards is often associated with the type of electoral process used. Generally, it is believed that the ward system provides representatives who are most intimately interested in, and more knowledgeable about, the needs of citizens in the particular areas they represent [Institute of Urban Studies (IUS), 1976]. This is possible because trustees have a much smaller and perhaps more homogeneous area to represent than under the at-large system. The IUS study (1976) points out, however, that with the ward system there is the danger of parochialism and the disproportionate representation in favour of minority groups. "This is due to the fact that the ward system of election is not decided by a majority of the votes, but by a majority within the wards" (Autin McDonald in IUS, 1976:4).

In terms of the at-large electoral system the trustee is responsible for representing the entire division. As such, it is argued that it is more difficult for the trustee to be sensitive to the individual needs within the division because of its large and heterogeneous nature. In addition, it is often found with the at-large system that representatives come from the same socio-economic groups or the same neighbourhood and reflect the attitudes of that dominant group (IUS, 1976).

The Director of Administration for Manitoba Education feels that the ward system effectively guards against the domination of any one socio-economic group or area on school boards (Krawec, 1988). He adds, however, that it is not necessarily the case that divisions which utilize at-large elections have less representative boards. Furthermore, he points out that there are other factors which have an influence such as whether the division is located in a suburban area or within the inner city. According to the Director, interest group domination on school boards generally appears to be less likely in the suburbs than in the inner city.

In terms of the most effective electoral process for achieving representativeness, the main factor seems to be the characteristics of the area (physically and socially) represented by trustees. The at-large system appears to be best suited to small homogeneous communities where the board is able to represent the community as a whole, whereas the ward system is more appropriate for larger areas where representation of the community as a whole is not possible. By using a ward system a larger division can be divided into more manageable units.

IUS observed that there is no one system which can guarantee a proper degree of representation on school boards. If representation is identified as an issue which needs to be addressed there are, however, special measures which may be introduced to improve representation. For example, there is a process called the "add on principle" which may be used in cases where due to population imbalance, minority groups lack the opportunity to be represented (Humphreys and Watson, 1986). This involves adding a position to the board for the purpose of representing an identified minority group. A version of this is currently being utilized in rural Manitoba whereby school divisions with Indian Reserves automatically have a position on the school board reserved for a representative of the Indian band(s). There are no special measures taken, however, to improve representation on school boards in Winnipeg.

The Director of Administration for Manitoba Education believes that broad community representation is essential on any school board. "No one socio-economic or ethnic group can effectively represent the interests of another" (Krawec, 1988). While representation does not appear to be a contentious issue on Winnipeg school boards at this time, he is of the opinion that minority and lower socio-economic groups are generally under-represented on school boards. The Director feels, however, that these groups are probably better represented at the school level on various school-parent committees.

There is also a perception that school boards have become much more representative of their respective communities over time. Roy White of the Manitoba Association of School Trustees feels this is due, to a large degree, to a better informed populace. He suggests that school boards today have many more younger trustees, women, lay citizens and minorities and fewer professionals than previously. Mr. White (1988) points out, however, that there is one characteristic of school board elections in Winnipeg particularly which may restrict the opportunity of some people to run for trusteeship - the campaign costs. Because of Winnipeg's large population, it is essential for candidates to be recognized. This often requires costly publicity which a lot of people may not be able to afford. Campaign expenses may be particularly high in divisions using at-large elections, as the candidate has a much larger area to cover. In the ward system the candidate would have a much smaller area to cover and there is greater chance that he/she will be generally known thus requiring less publicity. One way to eliminate this cost deterrent would be to compensate candidates for expenses incurred, however, this is not currently being considered.

Another possible deterrent to participation on school boards identified by some school division superintendents is the time commitment required of trustees. It was pointed out that school boards not only have frequent meetings but there is also a considerable amount of subsequent work that is required of trustees between meetings. A number of people may not be able or willing to devote the time required to be a trustee.

Despite some views that certain groups are under-represented on Winnipeg school boards, there is a general feeling among school administrators that the current electoral processes used, along with the variety of parent/school committees at the school level, provide adequate opportunity for citizen participation in education. One is also left with the impression that if representation is not achieved on school boards it is not necessarily the fault of the system. It should be noted that all of those from the education system who were surveyed or interviewed agreed that citizen input is essential. At the

time of this study there were a total of 68 trustees on the nine school boards studied.¹ In order to determine board characteristics, questionnaires were sent to all trustees. Of the 68 questionnaires mailed, 20 or 29% were completed and returned. The responses to the questionnaires are presented in Figure 3.1 and reveal a number of interesting characteristics about the respondents.

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1. Winnipeg School divisions and size of boards: Winnipeg No. 1-9 trustees; St. James Assiniboia - 8; Assiniboine South - 7; St. Boniface - 5; St. Vital - 7; Norwood - 5; River East - 9; Seven Oaks - 9; and Fort Garry - 9.

FIGURE 3.1

SURVEY RESPONSES
WINNIPEG SCHOOL BOARD TRUSTEES

Length of Time on Board

Less than 1 year	10%
1 - 2 years	30%
2 - 3 years	5%
3 - 4 years	0
More than 4 years	55%

Participation on Other Boards

Yes	70%
One other board	50%
Multiple boards	50%
No	30%

Reason for Becoming Trustee

Professional Interest	15%
General Interest	85%

Previous Knowledge of Board Activities

Yes	85%
No	15%
Type of knowledge: (17 responses)	
General interest in education	41%
Trained in profession	29%
Previously employed in org.	18%
Volunteer in organization	12%

Sex

Male	45%
Female	55%

Age

18-24	0
25-34	5%
35-44	30%
45-54	25%
55-64	25%
65	15%

Occupation

Legal Profession	10%
Homemaker	30%
Retired	15%
Management/Admin.	10%
Student	10%
Other	20%

Ethnicity/Nationality
(18 responses)

British	28%
German	11%
Ukrainian	11%
French	5%
Icelandic	5%
Canadian	22%
Other	17%

(Figure 3.1 continued)

<u>Family Status</u>	
Single	20%
Married	80%

<u>Education</u>	
Less than Grade 12	5%
Grade 12	10%
College	25%
Bachelor's Degree	40%
Master's Degree	15%
Phd	5%

<u>Household Income</u>	
(15 responses)	
<\$15,000	0
\$15,001-\$25,000	0
\$25,001-\$35,000	33%
\$35,001-\$45,000	27%
\$45,001-\$55,000	20%
>\$55,000	20%

In terms of the length of time that members have been on the board, a majority of respondents (55%) have served for more than one term. There also appears to be extensive involvement on other non-profit boards among the respondents (70%). General interest is the primary reason cited by 85% of the respondents for becoming trustees while the same proportion had previous knowledge of board activities. In terms of the type of knowledge, a large proportion of the 17 respondents to this question (41%) suggested they had a general interest in education while 29% had related professional training. A majority of the respondents (55%) were women. There appears to be a fairly even distribution among the age categories between 35-64 with the largest category, 35-44, making up 30% of the respondents. The largest occupational category among respondents is homemaker (30%), otherwise there appears to be a fairly even distribution of trustees among the legal profession, management/administration, retirees and students. The "other" category includes such occupations as publishing, civil service and self-employed. The largest ethnic or nationality group of the 18 respondents to this question was British (28%). Generally, there appears to be a diversity of ethnicities and nationalities represented by the respondents. A large proportion of the respondents (80%) were married, while 85% have a level of formal education beyond Grade 12. Of the 15 trustee respondents to the question on household income, 33% are in the income bracket of \$25,001-\$35,000, which is somewhat below what is considered to be the average income of \$35,001-\$45,000. However, forty percent of the respondents have annual household incomes in excess of \$45,000. This corresponds with the relatively high level of education among trustee respondents.

As a supplement to the data derived from our survey Michael Bergsgaard, a graduate student at the University of Manitoba, conducted a survey of newly elected school board trustees in Manitoba following the 1986 election (Bergsgaard, 1987). Bergsgaard surveyed 78 out of a possible 500 trustees throughout Manitoba. Of the 78 surveyed, 32 or 42% were from urban school boards. Bergsgaard's study found that a great majority of trustees were home-makers (31%), farmers (18%) or individuals working in areas considered to be non-professional. Only 21% of the respondents were working in or retired from, professional occupations. Of the 78 trustees surveyed, 35% were women which while still being a minority was felt to be a sizeable proportion.

Generally, Bergsgaard's study found that trustees did not ordinarily have above average income and those working in the professions or as owners, officials or managers were clearly a minority. The findings of his study led Bergsgaard to conclude that "Rather than elitists using public schools as a means to preserve the economic stratification of society, Manitoba trustees appear to have a range of socio-economic background and their abiding concern generally seems to be providing a good education for all children" (1987:27).

The findings of Bergsgaard's study cannot be directly compared with this analysis because we focus specifically on Winnipeg school boards. Our urban emphasis will undoubtedly net different results than if we had included rural school boards. It is interesting to note, however, that of our respondents there was a majority of women, a generally higher than average education level and a fairly wide distribution of occupations largely of the professional type. These findings vary considerably from Bergsgaard's findings and would generally suggest that school boards in Winnipeg are more dominated by socio-economic elites. In light of this, the conclusions to be drawn from Bergsgaard's findings may be limited.

3.3 Child and Family Services Agency Boards

There are presently six Child and Family Services Agencies (CFS) in the City of Winnipeg, each of which is responsible for a particular area of the City.¹ The existing structure of CFS in Winnipeg is the direct consequence of the 1985 reorganization of the Children's Aid Society of Winnipeg. The reorganization was a response to charges that the Society was not responsive to community needs, particularly with regard to adoption procedures used for Native children (Kimelman, 1985). In addition, the lack of citizen input generally in child welfare services was cited as a serious inadequacy of the Children's Aid Society of Winnipeg (Bakken, 1988). The reorganization constituted a move towards a more decentralized community-based service. At the centre of the new CFS agencies are the Boards of Directors composed of professionals, volunteers, clients and the general membership. By including community participation on the boards it was hoped that communications with the community would be improved, programs would become more responsive to community needs and the agencies would become more accountable to the community.

¹ Agencies and number of board members: Child and Family Services of Winnipeg West - 16; Northeast Winnipeg Family and Child Extended Social Services - 16; Northwest Child and Family Services Agency - 16; Winnipeg South Child and Family Services - 18; Child and Family Services of Central Winnipeg - 14; and Child and Family Services of Eastern Manitoba - 21.

The six child and family agencies were created by The Child and Family Services Act of 1985. The primary aim of this legislation, to make these agencies more community-based, is reflected in one of the principles of the Declaration of Principles stated in the Act. It reads as follows:

"Communities have a responsibility to promote the best interests of their children and families have the right to participate in services to their families and children."

As prescribed by the Act, the agency board is a governing body responsible for the general management of the affairs of the agency. The by-laws of the agencies state specifically that boards are responsible for finance, personnel, planning, policies and public relations as they relate to each agency. The Director of Child and Family Support for the Department of Community Services describes the role of agency boards as being responsible for carrying out provincial child welfare services as directed by the provincial Director's office (Bakken 1988). The services provided by the agencies must meet provincial standards as well as satisfy local needs. Child welfare policy is largely the responsibility of the provincial Department of Community Services, while agency boards are responsible for service delivery policy within the framework of the provincial legislation and regulations (Bakken, 1988).

The Executive Directors and the Chairpersons of the boards surveyed for this study all indicated that the boards were meeting the mandated role prescribed in the legislation and regulations. It was frequently noted, however, that their role was "limited" to that prescribed in the provincial legislation and regulations. From the comments provided by survey respondents, the concern appears to be that the agencies do not have the total freedom to develop initiatives to address needs unique to their areas. There appears to be limitations associated with the array of mandated services agencies are required to provide. In meeting this role, there is little flexibility afforded agencies to go beyond the mandated services. This, coupled with some concern about how much input local agencies have into provincial policy, brings into question the effectiveness of CFS agency boards as citizen input mechanisms.

The composition of agency boards is prescribed in The Child and Family Services Act generally and more specifically in Regulation 61/86. Regulation 61/86, states that agency boards shall be composed of the following:

- (a) 3 appointed by the Lieutenant Governor-in-Council;
- (b) 12 elected from agency membership;
- (c) 1 elected by employees;
- (d) representation from Community Advisory Committees or Resource Centre Communities.

In terms of the 12 elected positions, subsection 3(3) of Regulation 61/86 specifies that nine shall be elected at-large, and three from services providers (those public and private child care agencies which are located within the region of the child and family service agency). Other than the staff representative which has a one year term, all terms of office are three years with the maximum tenure of nine years. Most agencies utilize a nominating committee composed of representatives from both the general membership and the board. The committee is responsible for presenting candidates for the nine at-large positions at the agency's annual meeting. The general membership in attendance at the meeting elects candidates to fill vacant board positions.

As discussed earlier, the Boards of Directors are the main governing bodies of CFS agencies, being responsible for policy, budget control, program planning and implementation and general management. Considering this role and the broad representation prescribed by their regulations, it appears that these boards enable considerable opportunity for citizens to participate in the decision-making process of these organizations. The mandated composition also provides for a broad knowledge base which should benefit the decision-making process. Utilizing people from the general membership on the nominating committee also helps to avoid self-perpetuating boards. The Director of Child and Family Support suggested that since the reorganization CFS is now much more community based and more accessible to the community in terms of participation.

In addition to the opportunity to participate on the board directly there are also a number of other opportunities at various levels for citizens to become involved with CFS organizations. In order to facilitate community outreach, all agencies are divided into subregions which are represented by community councils or regional advisory committees. These committees are comprised of residents from each subregion and function in an advisory capacity identifying needs of their respective communities or reacting to existing programs. These committees have also developed and implemented small scale programs for their areas under the general direction of their agency board. Each committee has a representative on the agency board which ensures that CFS agency regions are geographically represented. There are presently 20 such committees operating in the City.

According to Gale Sager, Executive Director of the Northeast Winnipeg Family and Child Extended Social Services, they have found that people tend to participate on these councils based on specific program interests. It is not uncommon for people to stay on the council just long enough to get a program off the ground, promote an issue or see a short-term program through. Consequently, council membership has a high turn-over rate with short-term commitments. Initially the agency was concerned about this but came to realize that it is one of the reasons for the success of community councils.

They found that such flexibility enables wider community participation and reduces the likelihood of "burnout". Those who get involved do so for a short term and with vigor because of their commitment to a specific issue or program. The high turn-over rate ensures the continuous flow of new ideas. According to Ms. Sager, the key to the success of community councils has been their flexibility.

In addition to community councils most agency boards also utilize people from the general membership on a variety of special committees of the board. Such committees include: finance, personnel, community relations, nominating, planning and review and even the executive committee. Not all agency boards utilize general membership representatives on all their committees; it appears to be selective. Such participation is another opportunity for community residents to have input into CFS agencies.

With the opportunities available to participate on the board, community committees and board committees, CFS appears to be very accessible for citizen input. At the time of this study there was a total of 105 members on the boards of the six CFS agencies in Winnipeg. Questionnaires were sent to all board members; 36, or 34%, were completed and returned. The results of the questionnaires are presented in Figure 3.2.

FIGURE 3.2

SURVEY RESPONSES
MEMBERS OF THE BOARDS OF CHILD AND FAMILY SERVICES

Length of Time on Board
(54 responses)

Less than 1 year	25%
1 - 2 years	36%
2 - 3 years	25%
3 - 4 years	11%
More than 4 years	3%

Participation on Other Boards

Yes	69%
One other board	52%
Multiple boards	48%
No	31%

Reasons for Becoming Board Member

Appointed	31%
Government	27%
Board	18%
Organization	45%
Professional interest	25%
General Interest	44%

Previous Knowledge
Board Activities

Yes	81%
No	19%
Type of knowledge: (33 responses)	
General interest in field:	9%
Trained in social services:	42%
Worked in related field:	6%
Volunteer in service:	39%
Studied subject:	3%

Sex

Male	49%
Female	51%

Age

18 - 24	0
25 - 34	22
35 - 44	39
45 - 54	22
55 - 64	14
65+	3

Figure 3.2 (continued)
Survey Responses
Members of the Boards of Child and Family Services

<u>Family Status</u>		<u>Education</u>	
Single	21%	Less than Grade 12	3%
Married	79%	Grade 12	3%
		College	22%
		Bachelor's Degree	39%
		Master's Degree	31%
		Phd	3%
<u>Occupation</u>		<u>Ethnicity/Nationality</u>	
Legal Profession	3%	British	9%
Health Related	6%	French	3%
Social Related	36%	German	3%
Educator	19%	Ukrainian	3%
Non-health Profession	6%	Jewish	3%
Management/Administrator	11%	Icelandic	3%
Sales/Service	6%	Native	6%
Retired	3%	Multiple	9%
Student	3%	Canadian	48%
Homemaker	6%	Other	12%
Other	3%		
<u>Household Income</u> (34 responses)			
< \$15,000	6%		
\$15,001-\$25,000	0		
\$25,001-\$35,000	15%		
\$35,001-\$45,000	35%		
\$45,001-\$55,000	18%		
> \$55,001	26%		

Not surprisingly, given their recent creation, Figure 3.2 reveals that a large proportion of respondents have served on their boards for only a short period of time. Participation on other boards appears to be high with 69% of the respondents indicating additional involvement; of these respondents 48% are involved with more than one other board. Most respondents (44%) have become board members out of general interest, 31% were appointed to the board. Over 80% of respondents had previous knowledge of board activities, of which 81 % were either trained in social services (42%) or had volunteered in the services (39%). In terms of the age/sex distribution, there is a slight majority of female (51%) respondents and a fairly even distribution of age groups between the ages 25 to 64. The largest age group was the 35-44 category which accounted for 39% of the respondents. A large proportion of respondents were married (79%) while 95% had education higher than grade 12. 73% of the respondents had university education. The most dominant occupational group was "Social Services Related" accounting for 36% of all respondents. Generally, there appears to be a wide distribution of occupations although 81% can be considered professional. Ethnicity/nationality also reflects a wide distribution although 48% of respondents identified their ethnicity as being "Canadian". In terms of household income, the largest income category was \$35,001-\$45,000 accounting for 35% of respondents. It is interesting to note the fairly large proportion of respondents (26%) which have household incomes over \$55,001. This probably relates to the domination of trained professionals on the board. The 8% students and homemakers make up, for the most part, the 6% of respondents with household incomes less than \$15,000.

In terms of community representation on the board, the Executive Directors interviewed or who responded to questionnaires, along with the Director of Child Welfare, agreed that boards should be representative of the community. Broad community representation is essential in order for different needs and interests to be heard, to avoid parochialism and to achieve an appropriate level of communication between the agency and its community. It was the general consensus that, for the most part, CFS agency boards were representative of the communities served in terms of their dominant socio-economic and ethnic characteristics. The Executive Directors did not feel that boards were dependent upon a narrow constituency for its membership. They also believed that there is adequate opportunity available for citizen participation in the activities of CFS agencies, although one Executive Director pointed out that the time commitment required of board members may discourage participation by some people.

With respect to the issue of representation, the views of those interviewed and surveyed appear to contradict the findings of our board members survey. For the most part our data reveals that respondents were from higher than average socio-economic groups, which suggests that boards are not, in fact, representative.

One aspect which should help to broaden community representation on CFS boards is the existing publicity. In addition to being prominent in the community most CFS agencies actively publicize board vacancies. Common methods of publicity include: sending notices to staff, members of the agency and related organizations; and placing ads in newspapers. Such extensive publicity ensures that people are, at the least, aware of board vacancies.

3.4 Residents' Advisory Groups

There are six Residents' Advisory Groups (RAGS) in the City, each of which relates to one of the six designated "community areas" within the City of Winnipeg.¹

RAGS were first introduced in 1972 with the enactment of The City of Winnipeg Act. In providing for the amalgamation of the City of Winnipeg with surrounding suburban areas, the Act was designed to increase both citizen participation and administrative efficiency (Chekki, 1979). Orr (1984) argues that the local government reform of Unicity was a response to political theory of the 1960's which urged political decentralization and statutory provision of citizen participation. The emphasis at that time was to make local government more responsive and receptive to citizens' wishes. The City of Winnipeg Act provided for the Community Committee/RAG structure to meet the need for citizen input in local government. Orr notes that as a part of this

¹ Existing RAGS and members: East Kildonan - 19; Assiniboine Park-Fort Garry - 8; St. James-Assiniboia - 25; St. Boniface-St. Vital - 34; City Centre-Fort Rouge - 28; and Lord Selkirk-West Kildonan - 26.

structure RAGS were intended to be a focal point in the community for citizen participation. They were to be the vehicle for enhancing citizen participation and, in doing so, to provide access to information and a channel for communicating and influencing local government decision-making.

RAGS are provided for under subsection 21(1) of The City of Winnipeg Act. Advisors are elected by resident electors present at the annual community committee conference. Some community committees elect advisors by wards while others elect at-large. There is no limit to the number of RAG members that can be elected. Terms are one year in length and there is no limit to the number of terms people can hold in succession. According to Doug Kalscics, Chief Planner for the City of Winnipeg (1988), it is up to each community committee in cooperation with its RAG to decide on the details of membership, elections, responsibilities of RAGs, etc. Consequently, each RAG has developed specific characteristics which differentiate it from the rest. The role of RAGS as prescribed under subsection 2(4) of The City of Winnipeg Act is to "advise and assist the members of the community committee for the community at whose conference they were elected, as to the performance of their functions under this Act."

In a survey of RAG chairpersons the role of RAGS was described as including the following: to represent and reflect the concerns of residents on urban matters, to give advice to community committees on urban matters and to comment on planning and zoning matters including applications and recommendations to the City. Most chairpersons felt that RAGS were achieving their mandated role while one chairperson commented that not all councillors were receptive to the contributions made by the RAGS. It was noted that RAGS are not responsible for policy development or the administration of a budget.

When RAGS were first introduced in 1972 they were considered to be a unique experiment in citizen participation in local government. In fact, they were one of the first and still are one of the only, legislated mechanisms for citizen involvement in local government in Canada. Because of their uniqueness RAGS have been subject to considerable study and evaluation since their inception.

The general conclusion of many of these studies is that RAGS have failed to enhance meaningful citizen participation in urban government (Orr, 1984). The main reason cited for this failure is that their mandate and responsibilities are not clearly defined in the legislation. As noted earlier, The City of Winnipeg Act states only that RAGS are to advise and assist Community Committees in their functions. As a result of this uncertain role, Orr points out that the contributions made by RAGS tend to vary depending upon how receptive Community Committees are to their participation. Consequently this has resulted in frustration among RAG members. Orr points to declining attendance at meetings and in RAG membership over time as evidence of growing frustration. Another inadequacy which has affected the influence of RAGS on local government decision-making is the fact that Community Committees themselves have no real powers. Consequently, Orr argues that RAGS find themselves with very little on which to advise or assist. Orr also points out that RAGS were initially intended to address broader policy issues as they affect local areas. In reality, however, they have only been involved with minor issues of local concern.

Taking into consideration the many problems associated with the functioning of RAGS, the City of Winnipeg Act Review Committee in 1986 recommended that Council either make a decision to continue RAGS and to improve their role or establish a new mechanism to facilitate resident involvement. It was the opinion of the Review Committee that resident involvement is desirable, but that the existing Act did not necessarily foster meaningful participation. As it now stands the sections of the Act which relate to RAGS do not clearly define their role or mandate and Council has not assigned specific responsibilities or resources to them. The Review Committee concluded that while citizen participation in the form of RAGS has not been particularly successful, neither have the conditions necessary for success been present.

In response to the Review Committee's findings, the Minister of Urban Affairs issued a White Paper in February of 1987 on proposed changes to the Act. In a move to make city government more democratic and equitable and to improve planning in the City of Winnipeg, the Minister proposed, in part, to strengthen the RAGS and to expand the role of the community committees. In terms of strengthening RAGS, the Minister proposed changes to the Act which would ensure that each ward would be represented on the appropriate RAG. Furthermore, the government proposed offering financial assistance to RAGS to enable them to carry out their duties provided such assistance was supported and matched by the City. Proposed changes affecting the role of the community committees consisted largely of an effort to revitalize local planning by expanding their role in local planning and zoning matters. The intent was to decentralize some of the decision-making powers concerning planning and zoning issues, particularly those local in nature and impact.

These proposed changes to community committees and RAGS are an effort, in part, to improve the community committee/RAG structure as a formal mechanism for citizen participation in Winnipeg. It is important to note, however, as pointed out by various studies such as Orr (1984) , Wichern (1984), and the City of Winnipeg Act Review Committee, that the key to meaningful citizen participation depends, to a large extent, upon the responsibilities of community committees and the relationship between community committees and their RAGS. The Review Committee saw the expansion of community committee responsibilities in terms of enhancing their control over local matters, as being essential. The Committee advocated greater decentralization of political, planning and budgetary authority to the community committees. In addition to being responsible for local plans, zoning changes and variance and conditional use orders, it was argued community committees should be allocated financial resources for expenditures on local services, programs and facilities to meet individual priorities and needs.

The Minister's 1987 proposals respecting the powers and responsibilities of community committees and RAGS are less extensive than those of the Review Committee. They suggest more local control over planning and zoning but do not include greater budgetary and expenditure powers for community committees. The White Paper also does not address the provision of specific responsibilities for RAGS. It is the intention of the newly elected provincial government to review the proposed changes to the Act. This review should begin shortly.

At the time of this study there were 140 members on the six RAGS in the City of Winnipeg. Questionnaires were sent to all members, 55 or 39% of which were completed and returned. The results of this survey are presented in Figure 3.3.

FIGURE 3.3

SURVEY RESPONSES

MEMBERS OF RESIDENTS' ADVISORY GROUPS

Length of Time on Board

Less than 1 year	19%
1 - 2 years	13%
2 - 3 years	20%
3 - 4 years	7%
More than 4 years	41%

Participation on Other Board

Yes	56%
One other board	42%
Multiple boards	58%
No	44%

Reason for Becoming Board Member
(54 responses)

Professional Interest	2%
General Interest	87%
Other	11%

Previous Knowledge of Board Activities

Yes	43%
No	57%
Type of information:	
General interest in field	30%
Community Activist/Volunteer	43%
Trained in related profession	4%
Past councillor	9%
Other volunteer work	9%
Studied subject area	4%

Sex

Male	31%
Female	69%

Age

18 - 24	0
25 - 34	5
35 - 44	31%
45 - 54	18%
55 - 64	2%
65+	25%

Family Status

Single	16%
Married	84%

Education

(54 responses)

Grade 12	30
Grade 12	30
College	19
Bachelor's degree	13
Master's degree	9
Phd	0

Figure 3.3 (continued)
Survey Responses
Members of Residents' Advisory Groups

<u>Occupation</u> (53 responses)	
Health related	2%
Non-health related	4%
Educator	7%
Management/Administration	9%
Sales/Service	11%
Small Business Owner	2%
Labourer	11%
Homemaker	7%
Retired	26%
Student	7%
Other	17%

<u>Ethnicity/Nationality</u>	
British	16%
French	8%
German	2%
Ukrainian	10%
Jewish	4%
Multiple	14%
Canadian	35%
Other	12%

<u>Household Income</u> (46 responses)	
< \$15,000	7%
\$15,001 - \$25,000	13%
\$25,001 - \$35,000	30%
\$35,001 - \$45,000	17%
\$45,001 - \$55,000	13%
> \$55,000	20%

Figure 3.3 reveals that a large proportion of the respondents (41%) have made a long term commitment to RAGS, having served for more than four years. Also revealed is the fact that a majority of the respondents (56%) are active on other boards. Of those respondents 58% belong to more than one other board. General interest in urban issues was cited by 87% of respondents as the main reason for becoming a board member while 57% of the respondents noted that they had no previous knowledge of RAG activities prior to becoming a member. Of the 43% with previous knowledge, 73% cited general interest (30%) and community activism (43%) as being the primary source of their knowledge. A majority of the respondents were female (69%) while the largest age group was 35-44 accounting for 31% of the respondents. It is interesting to note that a fairly large proportion of the respondents (25%) were 65 years of age or older. A large majority of respondents (84%) were married. A most interesting characteristic of respondents in terms of education, is that 60% had grade 12 or less. Only 22% of the respondents had a university education. The most dominant occupational groups were "Sales/Service" and "General Labourer", accounting for 11% each of the respondents. There was a fairly large proportion of retired people (26%) among respondents. These findings reflect a wide distribution of occupational types on RAGS. The largest ethnicity/nationality category other than "Canadian" was "British", accounting for 16% of the respondents. This data generally reflects a wide distribution of ethnicity/nationality types on RAGS. The \$25,001 - \$35,000 household income category is the largest at 30% of the respondents. It is interesting to note that the next largest category at 20% is the \$55,000 and over. Finally, it should also be noted that 33% of the respondents have household incomes in excess of \$45,000.

In a separate survey of RAG chairpersons the majority of the respondents indicated that they felt their RAG reflected the general socio-economic and ethnic characteristics of their communities. The same respondents suggested, however, that such representation was not particularly necessary and provided the following explanations:

- Not everyone is willing or able to participate.
- It is not necessary for the function of RAGS but it would be desirable.
- Those who join RAGS tend to be activists, articulate, informed or concerned, prepared to devote time and possibly politically ambitious.

A majority of the respondents also felt that RAGS provided an adequate opportunity for residents to become involved and that there was no particular aspect of the existing structure of RAGS which might discourage participation. One chairperson pointed out, however, that the attitudes of some councillors in terms of their lack of cooperation may discourage some people from participating. Furthermore, a lack of an advertising budget means that general knowledge of RAGS may be limited. This may explain why a large proportion of respondents had no previous knowledge of RAGS. All respondents agreed that the citizen participation afforded by RAGS was essential to urban government.

3.5 Other Government Mandated Citizen Boards

The citizen boards which have been discussed to now tend to represent the most direct and in most cases, the longest standing opportunities for formalized citizen input into the public sector. However, there are a number of other boards in operation in Winnipeg or under consideration which enable citizens to participate in some aspect of the public sector both at the provincial as well as the city level. This section will take a brief look at some of these other boards, both existing and prospective.

A number of non-profit community health centres or clinics operate in Winnipeg under the auspices of The Hospitals Act. Each of these clinics is governed by a board of directors which is responsible for policy and program development and implementation, budget administration and the general operations of the clinic. The composition of health clinic boards consists of a mixture of appointed and elected positions similar to hospital boards, with the main difference being that elected positions appear to be more common on health clinic boards. The administrators of the clinics who were contacted for the study indicated that the boards try to maintain a broad representation of the community. They also noted that certain expertise was desirable. One administrator reported that his board attempts to balance representation on the board among business, social services, legal profession, medicine, community affairs and lay citizens. The attempt to achieve broad community representation is exemplified in the case of one clinic. The Women's Health Clinic specifies

in their by-laws a policy on board composition designed to ensure a broad representation of their membership. The three categories of preferred elected board members positions include:

1. Professionals: particularly in the areas of law, finance, business. These are considered to be essential for the administration of the organization.
2. Women skilled in the area of women's health: this may include experience and/or education. These are considered to be essential for the services provided by the clinic.
3. Women with no particular expertise: These are to represent the health consumer and the community in general.

In addition to becoming a board member, citizens may also participate on a variety of committees of the boards such as the executive committee, nominating committee, program and planning committee etc. Most clinics utilize committees composed of board members, staff, volunteers and the general membership.

In discussing the issue of representation with the administrators, they stressed that community/client input was essential to the effectiveness of services provided by their organizations. In considering, simply, the opportunities that exist for community/client participation in the health clinics reviewed, one is left with the impression that these are not just words alone. Community health clinic boards appear to be much more community-based than some of the other citizen boards previously reviewed. In some cases, perhaps the difference is related to the fact that the initiative for the

service originated in the community rather than in government. For the most part, the development of community health centres began at the "grassroots" as a desire of the community.

In terms of services for the mentally handicapped, the now completed Welcome Home Program utilized regional committees which enabled citizen/client input into the program. The Welcome Home Program was introduced in 1984 by the Department of Community Services, to facilitate the deinstitutionalization of approximately 200 mentally handicapped residents of the Manitoba Developmental Centre in Portage la Prairie (Ross, 1988). The aim of the program was to place these persons in community-based care. To oversee the transition from institutional to community-based care, regional implementation committees were formed in each Community Services region in the province.¹

According to Ben Lewis, Executive Director of Programs for Community Social Services, committee members were appointed largely on an ad hoc basis and frequently through a process of self-selection. Some effort was made however, to provide representation from a variety of areas including: service providers, consumers, advocates, government and general community residents. Now that the Welcome Home Program has been completed these committees no longer have a mandate. Consideration is currently being given to the role these committees might play in the future. In the meantime they continue to meet, acting largely in an advisory role to regional services for the mentally handicapped (Lewis, 1988).

¹ There are presently ten Community Services and Health regions throughout the province, three of which are located in the City of Winnipeg. These regions consist of catchment areas for integrated health and social services. Each region has a director who is responsible for overseeing the delivery of health and community services to area residents.

Turning to the area of mental health services, consideration has been given in recent years to implementing regional mental health committees to provide an opportunity for citizens and consumers to have direct input into this service area. The proponents of such a move argue that such committees, being empowered to direct mental health services in their respective regions, would help to build a better mental health system. The committees could tap local resources, help to build community support for community-based services, ensure that local needs are being addressed, help to integrate a fragmented mental health system, increase public accountability, and be more effective in soliciting political support for mental health services. Bill Martin, Executive Director of the Canadian Mental Health Association - Manitoba Division (CMHA), stresses that empowerment is the key to the effectiveness of these boards in enabling meaningful citizen participation. Ideally these boards should have direct input into the decision-making process with respect to mental health services (i.e. both budget and some policy control). If they assume a more advisory role then this role should be clearly defined and to be effective, must consist of advising the decision-makers directly. In terms of the policy process, Mr. Martin believes that the most effective structure would be a central board at the provincial level responsible for the overall policy framework, with regional committees responsible for developing local programs and policy within this provincial framework. Included in this structure should be a consultative process which would provide for ongoing communications between regional boards and centralized provincial bodies.

Presently, mental health services in Manitoba do not utilize citizen boards. Although the province has been divided into ten regional areas for the purpose of the delivery of health and social services, these regions have not been adequately empowered and are strictly administrative arms of government. Planning and resource allocation authority for mental health and other services remain centralized within senior levels of Manitoba Health or Community Services and the governing bodies of private institutions such as hospitals.

Don McLean, the Assistant Deputy Minister of Health, points out that there is recognition of the importance of citizen input into provincial mental health services. It is particularly important as the province moves toward more community-based services. An internal report of the department entitled "Mental Health Services in Manitoba: A Strategic Plan for Reorganization" calls for the use of regional task forces with community representation, to develop a plan for services in each region. Such plans are intended to reflect the unique characteristics of each area. Mr. McLean envisions that once these plans have been adopted by the Minister, the task forces would move into a more advisory role and then eventually assume a management function for regional mental health services. With the recent change in government, however, any planned changes to the existing system are under review.

Both Mr. McLean and Bill Martin of CMHA concur that the existing regional structure of health and social services would facilitate, without too much difficulty, the adoption of more regionally controlled mental health services under the governance of regional boards. Considering the number of years that such a model has been discussed in this province and the general support it receives from departmental staff, one is led to believe that the major hurdle to its implementation has been a lack of political will on the part of successive governments.

Another citizen board type operating in Winnipeg is the youth justice committee. These committees are community-based volunteer boards which are responsible for a variety of functions within youth correctional services including the consideration of alternatives to fines and sentences. Some examples of the functions undertaken by youth justice committees include to:

- promote public awareness of the problems associated with crime and encourage public participation in the community corrections programs for youth;
- assist in the planning and evaluation of community corrections programs;
- develop and operate crime prevention programs;
- evaluate and address community youth opportunities;
- develop and implement alternatives to formal court proceedings for young persons who are alleged to have committed crimes;
- suggest sentencing alternatives to the Court upon request;

- mediate between victims and offenders and assist in making arrangements for offenders to make compensation to victims either by cash or personal service;
- arrange community service work, whereby offenders perform unpaid work for the benefit of the community;
- recruit and train volunteers to work in Community Corrections programs.

Youth justice committees are provided for under Section 69 of the Federal Young Offenders Act. This section empowers the Attorney-General of a province to establish one or more such committees. The power to create youth justice committees is permissive, and it is not necessary that they be established. As prescribed by the Act the role of these committees is to assist in any aspect of the administration of the Act or in any programs or services for young offenders. Anyone interested in becoming a member of one of these committees may submit their name for consideration by the committee. Members are honorary probation officers.

An official of Community and Youth Correctional Services - East District, commented that with the flexibility afforded to these committees they have developed in such a way as to reflect successfully the nature of their communities. This has enabled them to be truly sensitive to regional concerns. At the time of this study there were ten such committees operating in Winnipeg.

Finally, it should be noted that there are a multitude of advisory committees, boards and commissions in Winnipeg, too numerous to mention, which operate at both the provincial as well as the civic government level. These bodies may be ad hoc, being formed to address specific issues such as is the case with enquiries, or they may be more permanent such as advisory boards to specific departments. Most positions on these bodies are appointed by the government.

4.0 DISCUSSION

This section provides an evaluation of the various citizen boards reviewed in the previous section. Of particular concern to this evaluation will be the issues of effectiveness (as citizen participation mechanisms) and representativeness as they relate to these boards. Following from the discussion of citizen participation theory, effectiveness and representativeness should be reflected largely in the responsibilities and the structure of the citizen participation mechanisms. Therefore, this section will focus on the mandated and actual responsibilities and structures of the various boards reviewed.

There are a number of notable similarities and differences among the various boards studied, with respect to mandated responsibilities and structures. One significant common element shared by all boards, except RACS, is that they are all governing bodies of their respective organizations. As such they are responsible for: management of the general affairs of the organization, policy development, program planning and implementation, and budget control. This is significant because one of the key elements required for effective citizen participation is that citizens have direct decision-making responsibilities. If citizen participation is in the form of boards it is imperative that these boards have governing responsibilities.

One qualification in terms of the mandated board responsibilities which should be noted is that policy development is limited to specific aspects of service provision within provincial policy guidelines. These boards are governing bodies of agencies that are responsible for carrying out provincial services (with the exception of RAGS). As such, their responsibilities are prescribed by existing provincial legislation and regulations. Two questions arise from this fact:

- (1) how much influence do local boards have on provincial policy? and,
- (2) what limitations are placed on local boards by provincial service requirements?

In terms of the first question, the board's influence on provincial policy may be a key to their effectiveness as citizen input mechanisms. In order for citizen input to be meaningful it may be necessary for citizens, through local boards, to have a say in provincial policy. While this issue was not pursued in this study it may be a crucial aspect of the effectiveness of citizen participation.

In regard to limitations facing the boards, some survey respondents felt that existing legislation and regulations limited their boards in terms of being able to address local concerns. Particularly in the case of CFS, this limitation appeared to be related to provincial standards and service requirements. Having to carry out mandated provincial services reduces the ability of local boards to address unique local issues. It is questionable how much freedom these boards have to address local issues beyond the standards set by the provincial service requirements.

In terms of RAGS, the analysis found that the role of these groups is limited to an advisory function, which, in itself, is not clearly defined. There appear to be serious limitations and vagueness concerning the legislated responsibilities of RAGS. Consequently, this raises some doubts about their effectiveness as citizen input mechanisms. Nearly all RAG members who responded to the questionnaire reported that the existence of their group was essential. However, the effectiveness of the structure as a form of meaningful citizen input into urban government was uncertain.

It is not uncommon to find that the actual responsibilities of public boards fall short of their mandated role. In the case of the citizen boards reviewed in this paper it would appear that, for the most part, boards are fulfilling their roles as defined by their respective legislation. These roles, however, are thought to be limited by the existing legislation. As pointed out earlier, the role of the citizen boards studied (other than RAGS) are limited to the governance of service providing agencies.

Some people interviewed pointed out that in terms of meaningful citizen input into urban government the ad hoc citizen action approach appeared to be fairly effective. In many cases the RAG has become another obstacle for citizens in their efforts to have their concerns addressed. This, plus the fact that the role of the RAG is uncertain, has led many groups to "leapfrog" RAGS and go directly to Community Committees with their concerns.

While the ad hoc approach may be effective in some cases, there is no guarantee that the City will respond to the concerns expressed. Furthermore, this approach is often reactive which can reduce further the influence citizens wield. Both Leo and Chekki, professors at the University of Winnipeg who have studied citizen input into urban government, suggest that ideally citizen participation should reflect a variety of forms, both formal and informal. They note, however, that the legislated formal type of citizen participation is probably the best method to guarantee the opportunity for citizen input into urban government. If the legislated role is unclear, however, or does not include "real" decision-making power then the effectiveness of such an approach is questionable.

Another important factor influencing the effectiveness of citizen participation mechanisms and also their representativeness, is their accessibility to participation by the public. In the case of the citizen boards studied, this relates to the process used for determining membership on the board and to the other opportunities for citizen involvement in the organization. In terms of the membership process, all boards, except for hospitals boards, utilize a form of electoral process. The most open and democratic of the processes used appears to be school board elections. School boards utilize a highly visible and open form of electoral process.

Furthermore, the campaigning involved in such a process increases the public accountability of those running for trustee positions. There are also variations in the electoral process (ward vs. at-large elections) which enable school divisions to adjust to population changes so as to achieve the best representation possible on their boards. A somewhat more closed electoral process is used by CFS boards and RAGS which elect board members at their annual meetings.

Despite some limitations to the electoral process used by CFS, these agencies appear to offer the greatest opportunity for broad community representation on their boards. From the analysis it was found that staff, related external agencies, citizen advisory councils and the general membership are guaranteed positions on the board. Most agencies also publicize board vacancies extensively. Furthermore, the general membership is allowed to participate in the organization at a variety of levels including board committees; participation is not limited to being a board member.

The least democratic membership process appears to be that used by hospital boards which in essence appoint all board members. While the hospitals indicated that they try to maintain broad community representation, in the absence of a general electoral process there is greater chance that these boards will become self-perpetuating bodies. Hospital boards also appear to demand a "high calibre" of trustee with respect to their standing in the community and specific qualifications, which effectively eliminates a large proportion of the population from becoming a trustee. It is also interesting to note the emphasis hospitals place on the trustee being

representative of the hospital and not the community. Although this is an attempt, in part, to avoid interest group domination on hospital boards, it leaves the impression that hospital boards are not, in fact, community-based as suggested by MHO.

The analysis in Section 3 also revealed that despite the opportunities to participate, the time and responsibilities required of board members may effectively limit those able to participate on boards generally. This was particularly noted by the administrators of school divisions, CFS agencies and hospitals. It would appear that the boards of these organizations demand considerable time of their members and in some cases, certain expertise. Citizens who are unable to devote the time or who do not possess the required background will not be considered suitable candidates for board positions.

One potential limitation to a democratic electoral process which should be noted is that it does not ensure broad community representation. As discussed in the analysis on citizen boards, there are a number of problems associated with an electoral process (one example is campaign costs in school board elections) which may restrict the participation by members of some societal groups. It is also not uncommon for an electoral process to be dominated by highly organized groups or individuals. More often than not the lower socio-economic groups and ethnic minorities are under-represented on public boards because they do not possess the means to participate. The only sure way to avoid this situation is to reserve appointed positions on boards to such under-represented groups.

In terms of tenure, which is a factor in self-perpetuating boards, most of the boards studied have specified limited tenure. The only exception are RAGS and school boards, although in these cases the electoral process reduces, to some extent, the chance of self-perpetuation. It is generally acknowledged that limited tenure helps to avoid the problem of self-perpetuating membership on boards.

The representativeness of a board can perhaps be most clearly illustrated when the composition of a board, in terms of socio-economic and ethnic characteristics, is compared to the same characteristics in the community it serves. From the discussion on citizen participation theory such representation is seen as essential for meaningful citizen participation. Unfortunately, in this analysis time and resources were not available to develop a complete demographic profile of each of the boards and their respective communities. As an alternative, this analysis combines the data collected for all the boards by board type. By doing this the total geographic area of responsibility for each type of board is city-wide and therefore more heterogeneous. From this it is assumed that to be representative each type of board should be heterogeneous in its composition.

In analyzing the data presented in Section 3, it is not only the general characteristics of the boards that are of interest but, more importantly, the domination of any one or more characteristics which may indicate a lack of representativeness. It should be noted that while the overall response rate

to the questionnaires was relatively high (35%) for a mail-out survey, it nevertheless poses limits to the conclusions that may be derived from these results. In essence the data is representative only of the respondents and does not necessarily represent the general characteristics of the boards. It should also be reiterated that hospital board members were not surveyed, only occupational data is available for them.

Of the data derived from the board member survey the best indicators of representativeness are occupation, education, household income and ethnicity. With the exception of RAGS, professional occupations were found to be dominant among the respondents. Of these, a variety of occupations are represented. It is interesting to note that among CFS respondents, 36% were trained in the social services. This latter statistic corresponds with the fact that a large proportion of CFS respondents became board members out of professional interest. In contrast to these occupational statistics, RAG respondents tend to be dominated by non-professional occupational groups; only 22% could be considered professional. Related, to some extent, to the occupational characteristics of respondents is the education level. Here we find that a large proportion of RAG respondents (60%) have only grade 12 or less while a majority of school board and CFS respondents have university education. The difference in occupational and educational characteristics between RAGS and the other boards studied is a curious contrast. While the reason for this is not clear, it may be related to the different responsibilities of the boards. For example, boards with more direct decision-making roles may demand or attract more highly educated and experienced participants.

In terms of household income levels, 39% of all respondents indicated household incomes in excess of \$45,000. The most dominant income category was \$35,001 - \$45,000. CFS respondents had the largest proportion of highest income respondents. This corresponds to their generally higher education levels and professional occupations. In terms of the ethnicity of respondents, it is not possible to derive any real conclusions from the available data. Unfortunately, a large proportion of respondents indicated they were "Canadian" in answering the ethnicity question. Despite these limitations, the data reveals some diversity in ethnic backgrounds but also a notable lack of persons from recent immigrant groups and Native persons among respondents.

In addition to the data discussed above, a number of other characteristics of the boards studied are revealed from the survey results presented in Section 3. In terms of age of respondents there appears to be a fairly even distribution of ages groups between 35 to 55 among all boards. The most dominant age group found among most boards was 35 to 44. School boards and RAGs had a relatively large proportion of respondents in the 65 years and over category while CFS had a large representation in the 25 to 34 age group. With the exception of the respondents from CFS (who are participating in very new organizations), most respondents were long-term participants on their boards. A large majority were also active on a number of other boards which reflects an important characteristic of the respondent, i.e., their commitment to voluntarism. Also prevalent, particularly with

school board and RAG respondents, was the fact that most respondents became members because of a general interest in the services provided by the organization. With respect to CFS respondents, a large proportion became members of the board because of professional interest (trained in social services) or because they were appointed. With the exception of RAGS most respondents had previous knowledge of the board's activities. Finally, a large majority of the respondents were married and most were women.

The combined data on the composition of the citizen boards studied reveal that, for the most part, these boards are not representative of the community. This is suggested by such dominant characteristics of the board members as generally long term commitment, extensive involvement on other boards, professional occupations and higher level of education among hospital board, school board and CFS board members, and the generally above average household incomes. This data does not suggest heterogeneous boards with respect to these indicators. The limited data on ethnicity, while depicting some diversity, nevertheless shows an obvious absence of certain groups of people. With the exception of RAGS, the citizen boards studied show a general lack of members from lower socio-economic groups.

In terms of the "other" boards reviewed in sub-section 3.5, one aspect that stands out concerns the mandated composition of health clinic boards. In most cases these boards appear to provide considerable opportunity for citizen participation, reflected in the diversity of sources for elected positions. With elected representatives from staff, volunteer corps and the general membership, health clinic boards provide the basis for broad community representation. Given the scope of this paper, however, we were unable to collect any data on actual board composition of these clinics to determine whether or not representation has been achieved.

5.0 SUMMARY/CONCLUSIONS

The purpose of this paper was to investigate government-mandated citizen boards in the City of Winnipeg, to determine their effectiveness in enabling meaningful citizen participation and their representativeness in terms of the communities they serve. With respect to effectiveness, two primary indicators were analysed:

- (i) the role and responsibilities of the boards and;
- (ii) the accessibility of participation to the general public.

It was found in the review of citizen participation theory that the role and responsibilities of boards may be the key factor in meaningful citizen participation. The literature suggests that in order for citizen participation to be meaningful, it must enable citizens to be directly involved with decision-making functions, particularly as they relate to specific services which influence their lives. In order for this role to be ensured it was also suggested that it should be clearly specified in legislation.

In terms of these qualifications, the research for this study revealed that hospital boards, school boards and CFS boards in Winnipeg, for the most part, possess the necessary legislated functions to enable meaningful citizen participation. All of these boards are the governing bodies of organizations responsible for the delivery of specific public or publicly-funded services. RAGS, on the other hand, perform more of an advisory function and their legislated role and responsibilities appear to be vague. Considerable past

research into the RAG structure and operations suggests, that, for the most part, this mechanism has not enabled meaningful citizen input into urban government because it possesses no "real" decision-making responsibilities.

Despite the fact that three of the boards reviewed appear to possess the necessary elements to enable meaningful citizen participation (i.e., they are governing bodies) there may be some limitations associated with their legislated role and responsibilities. Concern has been raised by some survey respondents, particularly from CFS, that their existing legislated roles and responsibilities provide them with limited leeway to address unique local concerns. This perceived limitation was not investigated in this paper. However, it appears to be a consequence of local boards having to devote most of their time and budget to implementing universal statutory services. This is a problem which is likely not uncommon to most decentralized provincial services. In an effort to make provincial services more sensitive to local needs, service delivery has been decentralized. However, at the same time local chapters are still required to provide standardized mandated services.

To some extent, this problem is inherent in the fact that these local service delivery mechanisms are a part of the provincial service system. However, this limitation on addressing unique local needs could be lessened by giving boards more budgetary freedom to allocate some funds to programs particular to their areas. If this were done, though, it would be necessary to provide some guidelines for the allocation of these funds, to ensure that

they would in fact be used to address local servicing needs of the community. Alternatively, or even in combination, local boards could undertake their own fund raising to provide themselves with alternative funding sources which allow more flexibility in terms of budget allocations. Some boards, such as CFS and hospitals, do obtain funding from sources other than government but it is not known how this money is allocated internally. The issue of perceived limitations of existing legislated roles and responsibilities of boards may be a key factor in their effectiveness as citizen participation mechanisms. Further study of this issue is required to determine if there are any such limitations, and if so, what the implications might be.

Another possible limitation to the effectiveness of the citizen boards studied may result from their lack of input into provincial policy in their respective service areas. Some survey respondents suggested that their local boards have only limited input into provincial policy. If this is in fact the case then it raises some questions about the appropriateness of provincial policy and the mandated services being delivered by local boards. It also raises some doubts about the effectiveness of citizen participation boards. In order for citizen participation to be meaningful citizens should not only have input into local decision-making, they must also be able to contribute to provincial policy which is the foundation for the services being provided by their organizations. The author believes that, ideally, there should be a

separation of provincial policy and standards from local service delivery, but that at the same time the local level should be able to have some input into provincial policy development. The local level can shed considerable light on public needs and on program implementation. What is needed is a mechanism which provides for ongoing consultation between the local level and those provincial departments responsible for policy development. While it is most likely that such mechanisms do exist there may be problems associated with them which has led some survey respondents to believe that their boards have little input into provincial policy. Given the possible implications of this, further investigation is required to determine exactly what input the local level has into provincial policy and whether increased input would be desirable and workable.

It was noted earlier that due to limitations associated with their governing legislation, RAGS are not considered to be effective citizen participation mechanisms. Given the volume of research conducted on this matter, the author will not attempt to recommend specifics on how the effectiveness of RAGS may be improved. It would appear from the literature, however, that the key to improving their effectiveness rests with giving them some clear, legislated responsibilities with "real" decision-making powers.

The other indicator used to measure the effectiveness of the boards was their accessibility to participation by the general public. The citizen participation literature reviewed suggested that in order for citizen participation mechanisms to be meaningful they must be open to participation by all citizens. It is assumed that if certain groups in society are restricted from participating, then the citizen participation mechanism will not be representative of the community. Representation is thought to be an essential factor in achieving meaningful citizen participation. Generally, it is believed that one group in society cannot adequately represent the interests of another group. The two variables used to measure accessibility were:

- (1) the process used to fill board vacancies; and
- (2) the tenure of board positions.

This study found that the level of accessibility varied considerably among the boards studied. The primary factor which differentiated the various levels of accessibility was the process used by boards to fill board positions. Tenure was found not to have a significant impact because for the most part it is limited by the boards. This limited tenure helps to avoid, to some extent, the self-perpetuation of these boards. In terms of the process used to fill board positions, it was found that the combination of appointed and community elected positions used by CFS probably offered the greatest opportunity for public participation. It may be argued though that RAGS are equally, if not more, accessible than CFS because their electoral procedure is more informal and the qualifications and commitment required of advisors are

not as demanding as for CFS boards. It may also be argued that RAGS are much more grassroots oriented and therefore closer and more accessible to the general public than are CFS boards.

School board would likely follow CFS and RAGS on the accessibility scale. While probably offering the most open and democratic form of election, the somewhat more stringent qualifications and time commitments required of school board trustees may make these boards somewhat less accessible. There is also a significant deterrent associated with election campaign costs.

The most interesting finding of the investigation into accessibility is the apparent lack of accessibility to hospital boards when compared with the other boards studied. Hospital boards do not appear to be accessible to participation by the general public because most positions on the board are appointed and there is a demand for highly qualified trustees, particularly from business, law and finance.

The varying degrees of accessibility found among the citizen boards studied may be related to the role and responsibilities of the board, i.e., the fewer the responsibilities the greater the accessibility. In the case of hospital boards, it is probable that their perception of themselves, in most cases, as private rather than community institutions may be a factor in the apparent limited opportunity to participate that they offer. To conclude, the limited accessibility of some of the boards examined suggests they have limited effectiveness as citizen representation mechanisms.

The other major focus of this study, which is related to accessibility, is the representativeness of citizen boards with respect to the communities they serve. As noted earlier, the literature on citizen participation suggests that citizen boards must be representative of their community to be effective. The compositional data derived from the survey suggests that none of the four major board types studied are representative. This is reflected in such dominant characteristics as professional occupations, university education and above average incomes among respondents from school, CFS and hospital boards. In terms of RAGS, the results were biased in the other direction with a majority of respondents being in non-professional occupations and having less than university education. Generally, the data on ethnic composition revealed an absence of persons from more recent immigrant groups and persons of Native ancestry.

As pointed out in the discussion section; there are definite limitations to the method utilized to measure the representativeness of the boards. This coupled with a limited response rate to the board member survey suggests that our data may not be very reliable. Despite these limitations, the results do suggest the possible over-representation of certain socio-economic groups on the human services boards and the general under-representation of certain ethnic minorities. Given these indications, one is faced with uncertainty about how meaningful the citizen participation on these boards is. The domination of any one socio-economic group on these citizen boards may have an undesirable impact upon the services provided by these organizations in terms of what needs are being met and how. Certain interests may not be adequately considered or understood in the decisions that occur within these organizations.

The best and most sure way to ensure representation on these boards is to reserve positions for certain groups in the community. Alternatively, boards could use a combination of community elected positions, appointed positions (to ensure certain groups are represented) and geographic representation (such as is provided by the ward election system used by some school divisions). One of the keys to improving representation would appear to be the inclusion of an electoral process which permits the community to elect representatives.

It is interesting to note from this analysis that despite the various degrees of accessibility to participate among the board types studied, none of them appear to be particularly representative. Either this is a result of an inadequate data base or it reveals that only certain groups are willing or able to participate. This latter assumption may help explain the compositional differences found between RAGS and the other boards studied and their respective roles and responsibilities. These findings appear to suggest that the role and responsibilities of boards may have an influence on who is willing or able to participate. The issue of who actually participates on citizen boards, however, is a large and complex one that requires an investigation in itself for any conclusions to be drawn.

In closing, the findings of this study can be summarized as follows. Notwithstanding the limitations of this analysis, the findings have revealed that effectiveness in terms of enabling meaningful citizen input into public sector decision-making, varies considerably among the boards studied. With respect to the representativeness of these boards, the data suggests that certain groups may be under-represented despite the relative accessibility of the boards. Finally a number of issues have been identified which require further investigation.

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Chekki, Professor Dan: Faculty of Sociology,
University of Winnipeg.

Krawec, Alex: Director of Administration,
Department of Education.

Leo, Professor Chris: Faculty of Political Science,
University of Winnipeg.

Martin, Bill: Executive Director
Canadian Mental Health Association - Manitoba Division.

MacLean, Don: Assistant Deputy Minister,
Mental Health Services of the Department of Health

Siemens, Robert: Director of Urban Health Facilities,
Manitoba Health Services Commission

White, Roy: Manitoba Association of School Trustees

GENERAL INFORMATION SOURCES

Individuals:

Broadbent, Rosemary: Community Facilitator for Community and Youth
Correctional Services, Department of Community
Services.

Garvey, Isabel: Phd. candidate, University of Manitoba.

Joss, Jacquie: Manitoba Health Services Commission.

Kalscics, Doug: Chief Planner, City of Winnipeg

Kristjanson, Kathy: Program Analyst, Child and Family Services, Department
of Community Services

Lewis, Ben: Acting Executive Director of Programs, Community Social
Services, Department of Community Services.

McKenzie, Brad: School of Social Work, University of Manitoba.

Ross, John: Executive Director (Rural), Regional Operations,
Department of Community Services.

Riffel, Prof. Tony: Faculty of Education, University of Manitoba.

Scherer, Kathleen: Assistant Director of Health.

Selinger, Greg: Phd. candidate, London School of Economics.

Shephard, Heather: Manitoba Association of School Trustees.

Steffen, Randy: Manager of Education Services, Manitoba Health
Organizations, Inc.

Young, John: Acting Head, Education Administration and Foundations,
University of Manitoba.

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Organizations

Administrative Staff

Winnipeg general hospitals
Winnipeg school divisions
Winnipeg child and family services agencies
Winnipeg community health clinics

Board Members

School Boards
Child and Family Services Agency Boards
Residents' Advisory Groups

Acts

Hospital's Act
Public Schools Act
Child and Family Services Act
The City of Winnipeg Act

By-laws

Community health clinics
Child and Family Services Agencies
Hospitals

APPENDIX I

List of Current or Prospective Studies on Not-For-Profit Citizen Boards

Child and Family Services Boards and the Regionalization of Child and Family Welfare Services

- Expected completion: Winter of 88/89
- Contact: Mr. Jim Bakken - Director of Child and Family Support

Survey of Manitoba Health Boards

- The Manitoba Health Organizations, Inc. is expecting to repeat its 1984 survey of Manitoba Health boards during the fall of 1988
- Contact: Mr. Randy Steffan - Manager of Education at MHO

Study of Boards for Not-For-Profit Corporations in Manitoba:

- Extensive evaluation of not-for-profit boards in fulfilment of a Phd. in Management Studies at the University of Manitoba
- Expected completion: unknown
- Contact: Ms. Isabel Garvey - Phd. candidate in Management Studies at the University of Manitoba.

APPENDIX II

Survey Instruments



GOVERNMENT-MANDATED CITIZEN BOARDS IN WINNIPEG: AN ANALYSIS
SURVEY FOR BOARD MEMBERS

NAME (optional): _____

NAME OF ORGANIZATION: _____

1. How long have you been a member of this board?

_____ LESS THAN 1 YEAR

_____ 3 - 4 YEARS

_____ 1 - 2 YEARS

_____ MORE THAN 4 YEARS.

_____ 2 - 3 YEARS

2. Have you been or are you currently a member of other boards of non-profit organizations?

_____ YES

_____ NO

If yes, please specify what board(s). _____

3. Why did you become a member of this board (choose one answer only).

_____ APPOINTED: _____ GOVERNMENT, _____ BOARD or _____ ORGANIZATION.

_____ PROFESSIONAL INTEREST

_____ GENERAL INTEREST

_____ OTHER, SPECIFY. _____

4. Did you have any previous experience in or knowledge of the services provided by this organization before becoming a board member?

_____ YES

_____ NO

If yes, please elaborate _____

5. SEX: _____ Female

_____ Male.

6. AGE: _____ 18 - 24 years

_____ 25 - 34 years

_____ 35 - 44 years

_____ 45 - 54 years

_____ 55 - 64 years

_____ Over 65 years.

7. OCCUPATION: _____

8. ETHNIC BACKGROUND: _____

9. FAMILY STATUS: _____ SINGLE

_____ MARRIED

_____ NUMBER OF CHILDREN, IF ANY.

10.

2F. HIGHEST LEVEL OF EDUCATION ATTAINED:

_____ less than Grade 12
_____ Grade 12
_____ College
_____ Bachelor's Degree
_____ Master's Degree
_____ Phd.

11. HOUSEHOLD INCOME (optional):

_____ under \$15,000
_____ \$15,001 - \$25,000
_____ \$25,001 - \$35,000
_____ \$35,001 - \$45,000
_____ \$45,001 - \$55,000
_____ over \$55,001.

12. Do you receive an honorarium for being a member of this board?

_____ YES
_____ NO

If YES, how much do you receive? _____

GOVERNMENT-MANDATED CITIZEN BOARDS IN WINNIPEG: AN ANALYSIS
SURVEY FOR BOARD CHAIRPERSON

NAME (optional): _____

NAME OF ORGANIZATION: _____

1. How long have you been a member of this board?

_____ LESS THAN 1 YEAR _____ 3 - 4 YEARS

_____ 1 - 2 YEARS _____ MORE THAN 4 YEARS.

_____ 2 - 3 YEARS

2. Have you been or are you currently a member of other boards of non-profit organizations?

_____ YES

_____ NO

If yes, please specify what board(s). _____

3. Why did you become a member of this board (choose one answer only).

_____ APPOINTED: _____ GOVERNMENT, _____ BOARD or _____ ORGANIZATION.

_____ PROFESSIONAL INTEREST

_____ GENERAL INTEREST

_____ OTHER, SPECIFY. _____

4. Did you have any previous experience in or knowledge of the services provided by this organization before becoming a board member?

_____ YES

_____ NO

If yes, please elaborate _____

5. Except for special circumstances are board meetings open to the general public?

_____ YES

_____ NO

If not, why not? _____

6. How would you describe the role of this board? _____

7. Does the role of this board, as described in your answer to question 6, meet the mandated role set out in this board's by-laws and/or provincial legislation?

_____ YES
_____ NO, NOT EXACTLY
_____ DO NOT KNOW

8. If you answered NO to question 7, how does the current role of this board differ from the mandated role? _____

9. Does this board set policy for the organization?

_____ YES
_____ NO

If yes, please elaborate. _____

10. If you answered No to question 9, who is responsible for setting policy? _____

11. Does this board control the budget for the organization?

_____ YES
_____ NO

If not, who has control? _____

12. Does the composition of this board generally reflect the socio-economic and ethnic composition of the community it is intended to serve?

_____ YES
_____ NO
_____ DO NOT KNOW

13. Is a broad socio-economic and ethnic representation of the community necessary for a board of this nature?

_____ YES
_____ NO

If not, why not? _____

14. Do you think that certain aspects of boards of this nature might actually discourage a broad representation of the community on the board?

_____ YES
_____ NO

If yes, please elaborate. _____

15. Does your board provide adequate opportunity for community residents to participate in the decision-making processes of public services?

_____ YES

_____ NO

If not why not and how would you suggest the opportunity to participate could be improved? _____

16. Is community input essential for an organization such as this?

_____ YES

_____ NO

Please elaborate. _____

17. SEX: _____ Female

_____ Male

18. AGE: _____ 18 - 24 years

_____ 25 - 34 years

_____ 35 - 44 years

_____ 45 - 54 years

_____ 55 - 64 years

_____ over 64 years.

19. OCCUPATION: _____

20. ETHNIC BACKGROUND: _____

21. FAMILY STATUS: _____ Single

_____ Married

_____ Number of children, if any.

22. HIGHEST LEVEL OF EDUCATION ATTAINED:

_____ less than Grade 12

_____ Grade 12

_____ College

_____ Bachelor's Degree

_____ Master's Degree

_____ Ph.D.

23. HOUSEHOLD INCOME (optional):

_____ under \$15,000

_____ \$15,001 - \$25,000

_____ \$25,001 - \$35,000

_____ \$35,001 - \$45,000

_____ \$45,001 - \$55,000

_____ over \$55,001.

24. Do you receive an honorarium for being a member of this board?

_____ YES

_____ NO

If YES, how much do you receive? _____



GOVERNMENT-MANDATED CITIZEN BOARDS IN WINNIPEG: AN ANALYSIS
FOR ADMINISTRATORS AND AREA PLANNERS

NAME (optional): _____

NAME OF ORGANIZATION: _____

1. How would you describe the role of the board? _____

2. Does the role of this board, as described in your answer to question 1, meet the mandated role set out in the board's by-laws and/or provincial legislation?

_____ YES

_____ NO, not exactly.

3. If you answered NO to question 2, how does the current role of this board differ from the mandated role?

4. Does the board set policy for the organization?

_____ YES

_____ NO

If yes, please elaborate. _____

5. If you answered NO to question 4, who is responsible for setting policy?

6. Does this board control the budget for the organization?

_____ YES

_____ NO

If not, who has control? _____

7. Is a broad socio-economic and ethnic representation of the community necessary for boards of this nature?

_____ YES

_____ NO

If not, why not? _____

8. Do you think that certain aspects of boards of this nature might actually discourage a broad representation of the community on the board?

_____ YES

_____ NO

If yes, please elaborate. _____

9. Do boards of this nature provide adequate opportunity for community residents to participate in the decision-making processes of public services?

_____ YES

_____ NO

If not, why not and how would you suggest the opportunity to participate could be improved?

10. Is community input essential for an organization such as this?

_____ YES

_____ NO

Please elaborate. _____

11. Are there any prerequisites desired of board members for their effective participation on this board?

_____ YES

_____ NO

If yes, please describe briefly. _____

12. Other than becoming a board member, are there any opportunities for community residents to have input into the decision-making process of services provided by your organization?

_____ YES

_____ NO

If yes, please describe briefly. _____

13. To your knowledge, has any difficulty ever been encountered in filling board vacancies?

_____ YES

_____ NO

If yes, please explain. _____

14. Is any effort made to publicize board vacancies?

_____ YES

_____ NO

If yes, please describe. _____

15. Is the opportunity to participate on this board equally accessible to all adult residents of the community you serve?

_____ YES

_____ NO

If not, why not? _____

16. Do you feel that this board is too dependent upon a narrow portion of the population, e.g. highly motivated and educated people, for membership?

17. If you answered YES to question 16, do you think this resource is being exhausted?

_____ YES

_____ NO

18. What problems or difficulties, if any, could be encountered when a board becomes too dependent upon a narrow portion of the population for membership?

